Rebecca Caygill
Health Promotion Specialist (Physical Activity)
Specialist Health Promotion Service,
Penn Street,
Rochdale,
Lancs
OL161HX
Tel: 01706 517617

E-mail: rebecca.caygill@rochdalepct.nhs.uk

Regional Health and Physical Activity Coordinator (North West England), on behalf of the North West Public Health Team.

Response to Consultation on the Commission Nutrition and Physical Activity

Green Paper

15 March 2006

Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases

The European Commission opened a consultation on the green paper for promoting healthy diets and physical activity. It is clear from the paper that the Commission is responding to the increasing challenges of rising obesity and subsequent ill-health throughout the European Union, and the North West Regional Health and Physical Activity Coordinator (RHPAC) welcomes action in this area, and applauds the Commission for its activities to date. The responses to the consultation questions are focused on the physical activity element.

### IV.2 Health across EU policies

The North West RHPAC welcomes the Commission identifying Community policy areas as an area to act as a vehicle for change within the process.

Transport Policy: The RHPAC feels that more could be done at European level to promote healthy transport, also contributing to the sustainable development agenda. Increasing car use is creating a less active population, and bringing a cycle of loss of green spaces, particularly amongst the most deprived communities. There are many examples of good practice of healthy transport and promoting the use of walking and cycling as alternatives to car use, and these should be disseminated, promoted and integrated into a coherent active transport policies at the EU level.

Linked to the above transport policy is planning and urban design policy. There are a range of examples across the EU were good design policy as improved the 'walkability' of urban areas, which can have the added bonus of reducing crime and improving community cohesion. Town planners and housing policies need to incorporate, quiet street zones, play areas and green space into new developments and regeneration programmes.

It is important for the Commission to bear in mind when developing policies around nutrition and physical activity that population approaches rather than informed choice of individuals will lead to bigger impacts and has been proven to be more effective.

Research policy. The RHPAC believes that greater research is needed into the area of physical activity in particular, and especially as social marketing of physical activity is insignificant when compared to the marketing budgets of 'unhealthy' products such as McDonalds or Coca Cola. Research into promoting healthy messages under such conditions and market pressures is welcomed and necessary in tackling obesity and difficult choices.

There is still a dearth of robust information on effective physical activity interventions which bring about long term behaviour change. Long term multifactorial interventions are required to increase our intelligence on this complex issue.

In addition to this, the Research should look at environmental pan-European approaches to physical activity in built environments. In order to learn from countries with best practice, we should be focussing on countries with leptogenic environments rather than obesogencic ones, as these offer the greatest opportunities for learning. This may include looking at countries outside of the European Union, where the trend is different. Research should also look at long-term outcomes and not just short-term ones.

Research on cross-generational influence would also be welcomed. It is important to remember when addressing childhood obesity, that children often have limited individual choices, and research priorities should affect this. Other areas that are in need of greater research include wider behavioural impacts on nutrition and physical activity.

The RHPAC would like to stress the need for sustainability into research funding, as often good work is lost when funding ceases; also that the link between research and practice in this field should be strengthened. Research funding should be increasing available to non-clinical research, as social interventions are of significant importance in addressing areas around both nutrition and physical activity. In order to evaluate interventions it is necessary to develop a tool that may be used across different situations, thus allowing comparisons with consistency.

The group believes that the EU should play a role in bringing together existing research and dissemination of results, as well as creating an environment for consistent baseline data collection.

#### IV.4 The Public Health Action Programme

Consistent measurement of obesity and physical activity needs to be agreed across the EU if meaningful comparisons are to be made.

The National Institute for Clinical and Health Excellence (NICE) is a possible model for the dissemination of effective interventions.

## V.3 A focus on children and young people

It is vital that children develop positive attitudes to being physically active from a young age. This needs to begin with the under 5s and their families, both at home and in educational settings. As well as provision of good quality sport and physical education in school, children and young people should be encouraged to take part in free play and informal sport before school, during breaks and after school.

Developing safe routes to school is another key opportunity to build physical activity into the day. Sustrans in the UK are the leading organisation in the UK for developing programmes to support cycling and walking.

### V.4 Physical Activity and health education in the workplace

Work place health offers opportunities not yet fully explored with the purpose of increasing physical activity. This includes physical activity during working time and breaks as well as travel to and from work. Flexible working hours can also enable people to take part in physical activity at the start or at the end of the working day.

The European Commission could lead by example with interventions to improve the nutrition and physical activity of its employees.

## V.5. Building overweight and obesity prevention and treatment into health services

Primary care needs to play a stronger role in improving public health by promoting active lifestyles and providing guidance on physical activity and integrating this with healthy eating messages and advice on healthy diets. Programmes need to be organised in partnership with local government, the voluntary sector and private organisations.

#### V.6 Addressing the obesogenic environment

The EU should increase coherence between its complementary policies, such as transport, sustainable development and urban issues which together have a huge affect on physical activity by providing incentives for green and healthy urban planning. The Commission should also increase learning from good practice within Europe on these issues, and provide incentives for change.

Environments need to be safe, clean, green and attractive to encourage physical activity e.g. public stairways need to be **as** visible as lifts, well sign-posted and clean with social marketing messages to encourage their usage. The trend for using escalators in shopping malls needs to be discouraged.

However, the obesogenic environment also includes food and diet issues, not just physically activity-friendly environments. The availability of healthy food, and fresh fruit and vegetables in local communities could encourage more frequent walking trips to local shops. Also environments where people watch or take part in sport such as leisure centres, sports clubs and sports stadia need to provide healthy choices and safe walking and cycling facilities to avoid 'mixed' messages.

## V.7 Socio-economic inequalities

Many of the previous issues highlighted around safer, greener, cleaner streets, urban areas and green spaces are particularly pertinent for areas of low socio-economic deprivation and cannot be addresses in isolation. Integrated and cohesive policies around regeneration need to ensure that local people not only feel safe to walk and play in their local neighbourhoods but want to walk and play there. This

is particularly important for older people who need to maintain activity levels for their physical health but also for their social and mental health.

# V.8 Fostering an integrated and comprehensive approach towards the promotion of healthy diets and physical activity.

It is important to bear in mind the mental health aspects of these issues, not only negative impact of obesity on mental health, but also the positive benefits that are brought about by physical activity.

#### V.10 Cooperation beyond the European Union.

Since obesity and low physical activities is an issue in many counties worldwide, it makes sense to share experiences, knowledge and identify best practice on an international level. NICE and the Physical Activity Collaborating Centre is one mechanism for engaging with other international bodies such as the Centers for Disease Control and Prevention in the US.

#### V.11 Other issues

The RHPAC suggests the following priorities:

- The RHPAC welcomes and supports the Commission in its work in this area, and would encourage reform in several of its Policy areas currently having a major impact on the increase in obesity such as transport policy and planning
- The RHPAC calls for an increase in the possibilities for research in this field particularly around physical activity.

For further information please contact:

Jackie Brennan
Regional Health and Physical Activity Coordinator
North West Public Health Team
18<sup>th</sup> Floor,
Piccadilly Gardens,
Manchester
M14BE
United Kingdom
0044 161 952 4289
Jackie.brennan@dh.gsi.gov.uk

15 March 2006

This paper represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.